

Depression, anxiety and stress among parents of disabled children

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Parents were reported to experience complex feelings with the birth of a disabled or special child. Parents feel upset about the society's attitude towards their children which add their stress level. Aim of the study was to find the level of depression, anxiety and stress among parents with disabled child. Study also aimed to find the relationship between depression, anxiety and stress level among parents with disabled child. A cross sectional survey was conducted. Thirty parents (25 mothers and 5 fathers) with disabled child were participated in the study. The children were in the age range of 7 to 12 years with diagnosis of autism, intellectual disability, and cerebral palsy. Parents were selected randomly from a special school in Sabah, Malaysia where their children were studying. Socio-demographic data sheet and Depression, Anxiety and Stress Scale (DASS) questionnaire were administered individually. Data was analysed by using SPSS16.0. The result showed that the depression, anxiety and stress level of parents with disabled child are low. The result also showed that there was a positive relationship between the level of depression, anxiety and stress among parents with disabled child. Low level of anxiety, depression and stress were noticed among the parents.

Keywords: disabled children, anxiety, depression, stress, parents

Having a disabled child has interference on caregivers' quality of life and mental health and increases the burnout. Furthermore, as the functional impairment level of the child increases, the interference does too (Basaran, Karadavut, Uneri, Balbaloglu, Atasoy, 2013).

Depression, anxiety and stress are higher among parents who have disabled child. Parents were reported to experience complex feelings with the birth of a disabled or special child. The feeling includes losing someone that they love and thus causes depression and stress. The hardships of the parents of disabled child include economics problems, daily care routine for their child, family problem and so on. Some of the disabilities are associated with parental stress than others disabilities. For example, in several studies, it is found that the parents who have Down syndrome child have lower level of stress if compared to parents who have autism child (Kasari & Sigman, 1997).

Compared with other parents, mothers of children with autism spectrum disorder or other neurodevelopmental disabilities experience more stress, illness, and psychiatric problems. Although the cumulative stress and disease burden of these mothers is exceptionally high, and associated with poorer outcomes in children, policies and practices primarily serve the identified child with disabilities (Dykens, Fisher, Taylor, Lambert, & Miodrag, 2014).

Increased level of parenting stress was noticed among parents of autistic children. Mothers experience more stress than fathers and the level of stress was different with age of the children (Sabih & Sajid, 2006). Mothers with disabled children suffer from anxiety and depression which affected their quality of life. The reason that contributes to their anxiety and depression were financial problem, sleep disturbance, and social isolation (Bumin, Guna, & Tukul, 2008; Uskun & Gundogar, 2010). Parental stress differ diagnosis of the child that the depression and anxiety score were significantly higher in the mothers of autistic children than mothers of mentally retarded

children (Firat, Diler, Ayse, & Seydaoglu, 2002). More anxiety was noticed in mothers with psychotic children than with other disabilities (Ryde-Brandt, 1990).

Mothers reported more stress and anxiety than fathers. Higher perceived vulnerability scores were reported in parents of spina bifida patients in the younger age group, especially preschoolers (0-4 years). Parents of children with shunts reported more anxiety, depression and perceived child vulnerability (Malm-Buatsi et al., 2015).

In addition to high level of stress, parents with disabled children found to have weak sense of coherence and poor health (Oelofsen & Richardson, 2006). Parents feel upset about the society's attitude towards their children which add their stress level (Uskun & Gundogar, 2010).

In other countries, a lot of researchers have been conducted to examine depression, stress and anxiety among parents with disabled children. But, only a few studies have been conducted in Malaysia.

AIM of the study

To find the level of depression, anxiety and stress among parents with disabled child.

Objectives of the study

- To find the level of depression, anxiety and stress among parents with disabled child.
- To find the relationship between depression, anxiety and stress level among parents with disabled child.

Research design

A cross sectional survey was conducted.

Method

Participants

Thirty parents (25 mothers and 5 fathers) with disabled child were participated in the study. The children were in the age range of 7 to

12 years with diagnosis of autism, intellectual disability, and cerebral palsy. Parents were selected randomly from a special school in Sabah, Malaysia where their children were studying.

Instruments

Socio-demographic data sheet was used to collect information on socio-demographic details of the parents and children.

Depression, Anxiety and Stress Scale (DASS) questionnaire: DASS was developed by University of New South Wales in Australia. It is a self-report scale which is designed to measure the negative emotional states of depression, anxiety and stress. The scale contains 42 items and divided into three subscales (depression, anxiety and stress), each with 14 items. Each questions were rated on four point "Likert scale" of frequency ranged from 0 to 3 (0=did not apply to me at all, 1=applied to me to some degree or some of the time, 2=applied to me to a considerable degree or a good part of time, 3=applied to me very much or most of the time). Three subscales scores were rated as low level, moderate level and high level. For low level, the score is between 0-12, moderate level ranges 13-24 and high level ranges 25-36.

Procedure

After getting sanction from the centre, informed consent was obtained from parents. Parents were explained about the purpose of the research and administered questionnaires individually. Data was analysed by using SPSS16.0.

Results

From the table 1, it was noticed that 66.7% of the respondents were in age range of 40-49 years old. There were only 3.3% respondents with the age range between 20-29 years. Majority of the respondents were female (83.3%) and there are only 5 fathers (male) were included in this research. Majority of the parents were belonged to Christian religion (50%), 26.7% were from Islamic and 23.3% were from Buddhist religion.

Table 1: Shows the socio-demographic details of the sample

Variables	Frequency	Percentage (%)
Age		
Between 20-29 years old	1	03.3
Between 30-39 years old	7	23.3
Between 40-49 years old	20	66.7
Between 50-59 years old	2	06.7
Gender		
Male	5	16.7
Female	25	83.3
Religion		
Islamic	8	26.7
Christian	15	50.0
Buddhist	7	23.3
No. of children		
1	5	16.7
2	11	36.7
3	7	23.3
4	4	13.3
5	1	3.3
6	1	3.3
7	1	3.3

Occupation Status

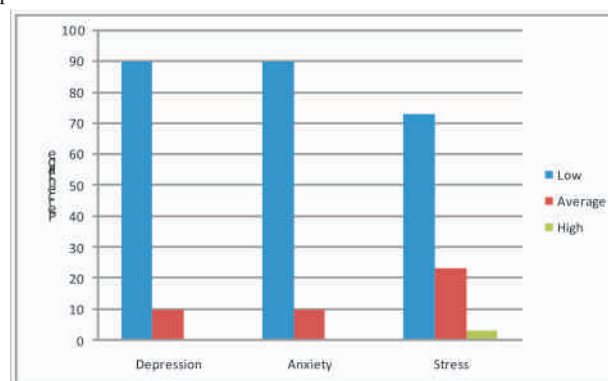
Working	11	36.7
Not working	19	63.3
Income		
Between RM1000-RM2000	9	30
Between RM2000-RM4000	18	60
More than RM5000	3	10

The table 1 showed that 11 of the parents had 2 children in their family. 23.3% of parents had 3 children in family and 16.7% of parents had 1 child. Another three parents had 5 children, 6 children and 7 children respectively.

Majority of the parents were not working (N=19, 63%) and only 36.7% (N=11) of the parents were working. Most of the (60%) of the parents had an income of RM2000 to RM4000 per month (middle class), 30% of parents had an income of RM1000 to RM2000 per month (lower economic status) and three parents had an income of above RM5000 per month (upper middle class).

The Graph 1 showed the level of depression, anxiety and stress level among the parents with disabled child. The level of parents' depression, anxiety and stress are low (90% for depression, 90% for anxiety and 73.3% for stress).

Based on the Graph 1 and Table 2, majority of respondent have a low depression level that is 90% with mean, $m=5.1$. For the anxiety level, majority of the respondents also have low anxiety that is 90% same as the depression level. For the stress subscale, majority of the respondents also have a low of stress level which is with 73.3% with mean, $m=10.37$. Overall, the depression, anxiety and stress level of parents that have disabled child are low.



Graph 1: Level of Depression, Anxiety and Stress among parents

Table 2: Level of Depression, Anxiety, and Stress among parents based on Mean, Frequencies and Percentages.

Level	Mean (m)	Frequency (n=30)	Percentage (%)
Depression	5.1		
Low		27	90
Moderate		3	10
High		0	0
Anxiety	6.4		
Low		27	90
Moderate		3	10
High		0	0
Stress	10.4		
Low		22	73.3
Moderate		7	23.3
High		1	3.3

The result of Pearson correlation analysis test (Table 3) showed that the depression and anxiety has significant and strong positive relationship ($r=.712$, $p<.05$). This result make it clear that parents who are reported high level of depression have high levels of anxiety as well.

Table 3: Pearson Correlation Matrix between the Scores of Depression, Anxiety and Stress among Parents of Disabled Child.

Variable	Sig	Depression	Anxiety	Stress
Depression	.000	-	.712**	.826**
Anxiety	.000	-	-	.833**
Stress	.000	-	-	-

Note 1: $n=30$, Note 2: ** $p<.05$

Pearson correlation analysis results also indicate a strong and significant relationship between depression and stress ($r=.826$, $p<.05$). Therefore, parents reported higher levels of depression will also report high stress levels.

The result of analysis also reported the strong positive relationship and significant between anxiety and stress ($r=.833$, $p<.05$). This result can explain that parent who are reported have high anxiety will also report high stress levels. The relationship between anxiety and stress are stronger, followed by the relationship between depression and stress and the last one is the relationship between depression and anxiety.

Discussion

The result of this research is contrary to the research that done by Oelofsen and Richardson (2006) which showed that the mothers and fathers of children with developmental disability have a high level of parenting stress. The results also contrary to finding by Ryde-Brandt (1990) that high level of anxiety and poor defence strategies in mothers of different disabilities. In Asian countries, people get more social support which may be a reason for low levels of anxiety, depression and stress among parents in the current study.

Studies also showed (Bumin, Guna, & Tukul, 2008) that the mother had high levels of anxiety and depression, which is caused by financial problems. Majority of the parents of the current study did not face any financial problems as indicated by their income; moreover government provides financial supports too. This may be another reason for low levels of stress, anxiety and depression. In addition to that parents were sending their children to a special education centre for a long time, so they are much aware about their children's condition and limitations, and thus might had adjusted to the child condition. Also, the centre may also give a strong support to the parents. This can leads to a low depression, anxiety and stress level among the parents of disabled child. In favour of this view point, one study reported that lack of governmental financial support were associated with overall parenting stress and the study suggested that government support may play an important role in reducing parenting stress in this population (Wang, Hu, Wang, Qin, Xia, Sun, Wu, & Wang, 2013)

The result also showed that there was a positive relationships between the level of depression, anxiety and stress among parents with disabled child. This result is supported by the previous research done by Lovibond and Lovibond (1995), and Szabo (2010). This

positive relationship may exists because of the common cause for depression, anxiety and stress.

Conclusion

Aim of the study was to find the level of depression, anxiety and stress among parents with disabled child. Study also aimed to find the relationship between depression, anxiety and stress level among parents with disabled child. The results showed that the depression, anxiety and stress level of parents with disabled child are low. There were strong positive and significant relationships among anxiety; depression and stress level were noticed.

Implication of the study

The study throws light on the fact that level of depression, anxiety and stress among parents with disabled children would vary with countries and the factors of this variation need to be identified. It also highlight the fact that mental health of the parents/care takers needs to be addressed in the intervention programme for disabled children.

Limitations and recommendation

The sample size was small as there were only 30 participants. The research was conducted in a particular centre which would limit the generalization of the results. The study can be replicated with large sample size with diverse geographical distribution.

References

- Asai, M., & Lucca, N. (1988). Individualism and Collectivism: Cross-Cultural Perspectives on Self-Group Relationships. *Journal of Personality and Social Psychology*, 54(2), 323-338.
- Basaran A1, Karadavut KI, Uneri SO, Balbaloglu O, Atasoy N.(2013) The effect of having a children with cerebral palsy on quality of life, burn-out, depression and anxiety scores: a comparative study. *European Journal of Physical Rehabilitation Medicine*, 49(6), 815-22.
- Bumin, G., Gunal, A., & Tukul, S. (2008). Anxiety, depression and quality of life in mothers of disabled children. *Arastirma*, 15(1), 6-11.
- Dykens, E.M., Fisher, M.H., Taylor, J.L., Lambert, W., & Miodrag, N. (2014). Reducing distress in mothers of children with autism and other disabilities: a randomized trial. *Pediatrics*, 134(2), e454-63. doi: 10.1542/peds.2013-3164.
- Firat, S., Diler, R.S., Ayse, A., & Seydaoglu, G. (2002). Comparison of psychopathology in the mothers of autistic and mentally retarded children. *Journal of Korean Medical Science*, 17(5), 679-685.
- Kasari, C., & Sigman, M. (1997). Linking parental perceptions to interactions in young children with autism. *Journal of Autism and Developmental Disorders*, 27, 39-57.
- Lovibond, P.F., & Lovibond, S.H. (1995). The structure of negative emotional states: Comparison of the Depression Anxiety Stress Scales (DASS) with Beck Depression and Anxiety Inventories. *Behaviour Research and Therapy*, 33(3), 335-343.
- Malm-Buatsi, E., Aston, C.E., Ryan, J., Tao, Y., Palmer, B.W., Kropp, B.P., Klein, J., Wisniewski, A.B., Frimberger, D. (2015). Mental health and parenting characteristics of caregivers of children with spina bifida. *Journal of Pediatric Urology*, 11(2), 65.e1-7. doi: 10.1016/j.jpuro.2014.09.009.
- Oelofsen, N., & Richardson, P. (2006). Sense of Coherence and Parenting Stress in Mothers and Fathers of Preschool Children with Developmental Disability. *Journal of intellectual & developmental disability*, 31(1), 1-12.
- Ryde-Brandt, B. (1990). Anxiety and defence strategies in mothers of children with different disabilities. *The British Journal of Medical Psychology*, 63(2), 183-192.
- Sabih ,F& Sajid, W.B.(2006). Factors associated with stress among parents of children with autism. *3Rawal Medical Journal*, 3, 214-216
- Uskun, E., & Gundogar, D. (2010). The levels of stress, depression and anxiety of parents of children in Turkey. *Disability and Rehabilitation*, 32(23), 1917-1927.
- Wang, J., Hu, Y., Wang, Y., Qin, X., Xia, W., Sun, C., Wu, L., Wang, J. (2013). Parenting stress in Chinese mothers of children with autism spectrum disorders. *Social Psychiatry and Psychiatric Epidemiology*, 48(4), 575-82. doi: 10.1007/s00127-012-0569-7.

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